Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/975,518			ing Date 11/2001	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A		1	N/A	
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1,16(o), (p), or (q))			N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *	•		X \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•		X \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1 16(s))	FEE is	eets of pap \$250 (\$125 Iditional 50	er, the applica for small entit sheets or fract	rings exceed 100 tion size fee due y) for each ion thereof. See 87 CFR 1.16(s).						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j))									1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	05/09/2011	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(ii)	- 22	Minus	·· 34	= 0	П	X \$ =		OR	X \$52=	0
	Independent (37 CFR 1,16(h))	· 7	Minus	8	= 0	П	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1:16(s))										
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAININ AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSL' PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,160))	*	Minus	*	=	П	x \$ =		OR	x s =	
Δ	Independent (37 CFR 1.16(h))		Minus	***	-	1	X \$ =		OR	X \$ =	
EN I	Application Size Fee (37 CFR 1.16(s))					l			1		
Ā	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))								OR		
	the entry in column			TOTAL ADD'L FEE	nstrument Ex	OR (amin	TOTAL ADD'L FEE				
	"If this "Highest Humber Previously Paid For" III THIS S."ACE to Isos than 20, onter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is Isos than 3, enter "3".  "If the "Highest Number Previously Paid For" IN THIS SPACE is Isos than 3, enter "3".										
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1,											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 38 U.S. C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gladering, preparing, and submitting the completed application from the USPTO. Time will vary depending upon the ininivibual case. Altry comments in the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chell Information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, V.S. 231-1450. DIO NOT SEXIO PEESS OR COMPLETED FORMS TO THIS. ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.